

ISSUE SLIP STAPLE AREA (for additional cross reference)

P SITI N	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	6-21-01
FORMALITY REVIEW			
RESPONSE F RMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	4/22/03
2	10/1/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

09/868262